## HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND FOR ACTIVE EMPLOYEES FORMERLY UNDER THE HSTA VEBA BU 05, 45 EFFECTIVE JANUARY 1, 2011

Benefit Plan	Type of Enrollment	Monthly Employer Contribution	Monthly Employee Contribution	Total Contribution Required
MEDICAL PLANS				
HMSA - 90/10 Medical, Drug, RSN Chiropractic, VSP Vision	Self Two-Party Family	\$172.86 \$416.96 \$532.56	\$243.02 \$587.32 \$749.06	\$415.88 \$1,004.28 \$1,281.62
HMSA - 80/20 Medical, Drug, RSN Chiropractic, VSP Vision	Self Two-Party Family	\$172.86 \$416.96 \$532.56	\$137.66 \$331.62 \$422.96	\$310.52 \$748.58 \$955.52
Kaiser Comprehensive Medical, Drug, RSN Chiropractic, VSP Vision	Self Two-Party Family	\$172.86 \$416.96 \$532.56	\$198.40 \$480.06 \$612.58	\$371.26 \$897.02 \$1,145.14
HMSA Supplemental Supplemental Medical, Drug, Vision RSN Chiropractic	Self Two-Party Family	\$104.94 \$252.14 \$322.32	\$151.28 \$365.76 \$466.56	\$256.22 \$617.90 \$788.88
DENTAL PLAN				
HDS Dental	Self Two-Party Family	\$17.06 \$34.18 \$70.66	\$13.72 \$27.40 \$30.68	\$30.78 \$61.58 \$101.34
HDS Supplemental Dental	Self Two-Party Family	\$0.00 \$0.00 \$0.00	\$17.14 \$34.34 \$51.46	\$17.14 \$34.34 \$51.46
VISION PLAN				
VSP Vision	Self Two-Party Family	\$3.64 \$6.76 \$8.84	\$2.40 \$4.42 \$5.78	\$6.04 \$11.18 \$14.62
LIFE INSURANCE Standard Life Insurance	Employee	\$4.16	\$0.00	\$4.16